



PART B - FEE(S) TRANSMITTAL

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28249 7590 04/20/2006

DILWORTH & BARRESE, LLP
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Paul J. Farrell	(Depositor's name)
<i>Paul J. Farrell</i>	(Signature)
July 18, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/799,034	03/12/2004	Pil-Soon Choi	678-1381 (P10807)	6704

TITLE OF INVENTION: APPARATUS AND METHOD FOR COMPENSATING FOR FREQUENCY OFFSET IN A MOBILE COMMUNICATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/20/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
VUONG, QUOCHIEN B	2618	455-226100			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Dilworth & Barrese, LLP
		2 _____
		3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Samsung Electronics Co., Ltd.

Korea Advanced Institute of Science and Technology (KAIST) Republic of Korea

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1121 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Paul J. Farrell*

Date July 18, 2006

Typed or printed name Paul J. Farrell

Registration No. 33,494

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